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Docket No. AMENDMENT TRANSMITTAL LETTER HSDO-P01-003 Examiner Application No. Filing Date Art Unit 10/656,479 September 4, 2003 N. Pass 3626 Applicant(s): Helitzer et al. SYSTEM FOR REDUCING THE RISK ASSOCIATED WITH AN INSURED BUILDING Invention: STRUCTURE THROUGH THE INCORPORATION OF SELECTED TECHNOLOGIES TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED Claims Highest Remaining Number Number After Previously Extra Claims <u>Amendment</u> Paid Present Rate **Total Claims** 22 50.00 200.00 26 х Independent 7 13 Х Claims Multiple Dependent Claims (check if applicable) Other fee (please specify): Extension for response within second month 460.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 660.00 Small Entity x Large Entity No additional fee is required for this amendment. × Please charge Deposit Account No. 660.00 in the amount of \$ A duplicate copy of this sheet is enclosed. A check in the amount of \$ _____ to cover the filing fee is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No. 18-1945 as described below. A duplicate copy of this sheet is enclosed. Credit any overpayment. Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. Dated: July 14, 2008 Attorney/Agent Reg. No.: 61,318 **ROPES & GRAY LLP** One International Place Boston, Massachusetts 02110 (617) 951-7234 I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Signature: (Joanne Ryan)

AMENDMENT TRANSMITTAL LETTER					Docket No. HSDO-P01-00
Application No.		Filing Date		Examiner	
10/656,479 pplicant(s): Helitzer et al.		September 4, 2003		N. Pass	
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	Remaining After Amendment	Number Previously Paid	Number Extra Claims Present	Rate	
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Independent Claims	7	- 13 =		x	
Multiple Depend	ent Claims (ch	eck if applicabl	e)		
Other fee (please specify): Extension for response within second month					460.00
TOTAL ADDITI	ONAL FEE FO	OR THIS AME	NDMENT:		660.00
x Large Entity				Small Entity	
No additional	I fee is require	d for this amer	ndment.		
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A check in th	e amount of \$		to cover	the filing fee is encl	osed.
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x Credit an	ıy overpaymen	t.			
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Haixia Uin Attorney/Agent I	Reg. No.: 61,3	318		Dated.	July 14, 2000
ROPES & GRAY	Y LLP				
One Internationa Boston, Massac (617) 951-7234)			
(011) 301-1234					

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